PART B - FEE(S) TRANSMITTAL



Complete and send this forms. together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571) 273-2885 This tom land INSTRUCTIONS: This term stability be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 37485 7590 12/16/2005 SWANSON & BRATSCHUN, L.L.C Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 1745 SHEA CENTER DRIVE, SUITE 330 HIGHLANDS RANCH, CO 80129 (Depositor's name onica Doucet 03/22/2006 SDENBOB2 00000020 10766634 (Signature 700.00 OP March 16, 2006 02 FC:1504 300.00 OP (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/766.634 01/27/2004 Joshua D. Rabinowitz 00033.03CON 3768 TITLE OF INVENTION: DELIVERY OF DIPHENHYDRAMINE THROUGH AN INHALATION ROUTE APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE YES \$700 \$300 \$1000 03/16/2006 nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** HAGHIGHATIAN, MINA 1616 424-045000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list William L. Leschensky (1) the names of up to 3 registered patent attorneys \square Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Swanson & Bratschun LLCV (2) the name of a single firm (having as a member a Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Alexza Pharmaceuticals, Inc. Palo Alto, CA ☐ Individual **A**Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fcc(s): Issue Fee XXA check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. \square The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-5117 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2) The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. March 16, 2006 Authorized Signature

Authorized Signature Date March 16, 2006

Typed or printed name Katherine Lobel-Rice Registration No. 58,079

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.